

<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) <b>42390P11149</b>	
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.		In re Application of <b>Gary Graunke, et al.</b>	
December 1, 2005		Application Number <b>09/896,537</b>	Filed <b>06/30/2001</b>
Signature <u><i>Libby H. Hope</i></u> Typed or printed name <b>Libby H. Hope</b>		For <b>Multi-Level, Multi-Dimensional Content Protection</b>	
		Art Unit <b>2132</b>	Examiner <b>Lanier, Benjamin E.</b>
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 1.17(b))		_____ \$500.00	
<input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: _____			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of the fee transmittal.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0221 I have enclosed a duplicate copy of the fee transmittal.			
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.			
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.</b>			
I am the		<u><i>Libby H. Hope</i></u> Signature	
<input type="checkbox"/> applicant/inventor.		<b>Libby H. Hope, Reg. No. 46,774</b> Typed or printed name	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)			
<input checked="" type="checkbox"/> attorney or agent of record.		<b>12/01/05</b> Date	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> *Total of _____ forms are submitted.			

Based on PTO/SB/21 (08-03) as modified by Blakely, Scholoff, Taylor & Zafman (vtr) 08/11/2003.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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